

FOCUS ON *Health*

Fall 2015

The magazine for
Horizon Blue Cross Blue Shield
of New Jersey members.



For more details,
visit **HorizonBlue.com.**



Horizon Blue Cross Blue Shield of New Jersey



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Giving our members easy, secure access to information



Message from Mark Barnard, Senior Vice President, Service

At Horizon Blue Cross Blue Shield of New Jersey, we know how valuable your time is. That's why we've developed secure, easy-to-use online tools and resources to help you manage your health plan information – when it's convenient for you. These tools are available to you 24 hours a day, seven days a week. To get started, just visit **HorizonBlue.com** and click *Member Sign In* in the upper right-hand side of the homepage to sign in. If you aren't registered yet, now is the perfect time to sign up.

Once you're signed in, you'll have secure access to your health plan information. You'll also find resources for personalized health and wellness advice, and hands-on tools that help you get the most out of your health plan.

With Member Online Services, you'll have access to exclusive tools to:

- ◆ View and print an ID card.
- ◆ Review which services and treatments are covered under your plan.
- ◆ View your claims, including the amount we paid and any amount you may owe.
- ◆ Manage your authorizations and referrals.
- ◆ Access time-saving plan tools.
- ◆ Get personalized health and wellness support.
- ◆ View the NJWELL reward page.

Have a question?

We also launched two online tools this year that give you easy and convenient ways to get answers to your coverage questions.

1 *Frequently Asked Questions*

You can visit **HorizonBlue.com/FAQs** for easy-to-follow steps on how to get the information you need from Member Online Services. Our FAQs are organized so you can quickly find the information you need.

2 *My Message Center*

Send us a message through *My Message Center*. *My Message Center* gives you more flexibility in how and when you communicate with us. Once you're signed in to Member Online Services, click the *My Message Center* button at the top of the screen. Our commitment to you is that a Member Services Representative will respond to your message within two business days. Read the article on page 15 for more information.

For more than 82 years, Horizon BCBSNJ has worked hard to provide our members with the tools, resources and services they need to help them understand their health plan and manage their health plan information. I hope you try our online tools and find them helpful as you learn more about your health care coverage.

Thank you for choosing Horizon BCBSNJ.

A handwritten signature in black ink that reads "Mark Barnard". The signature is fluid and cursive.

Mark Barnard
Senior Vice President, Service



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new flu shot



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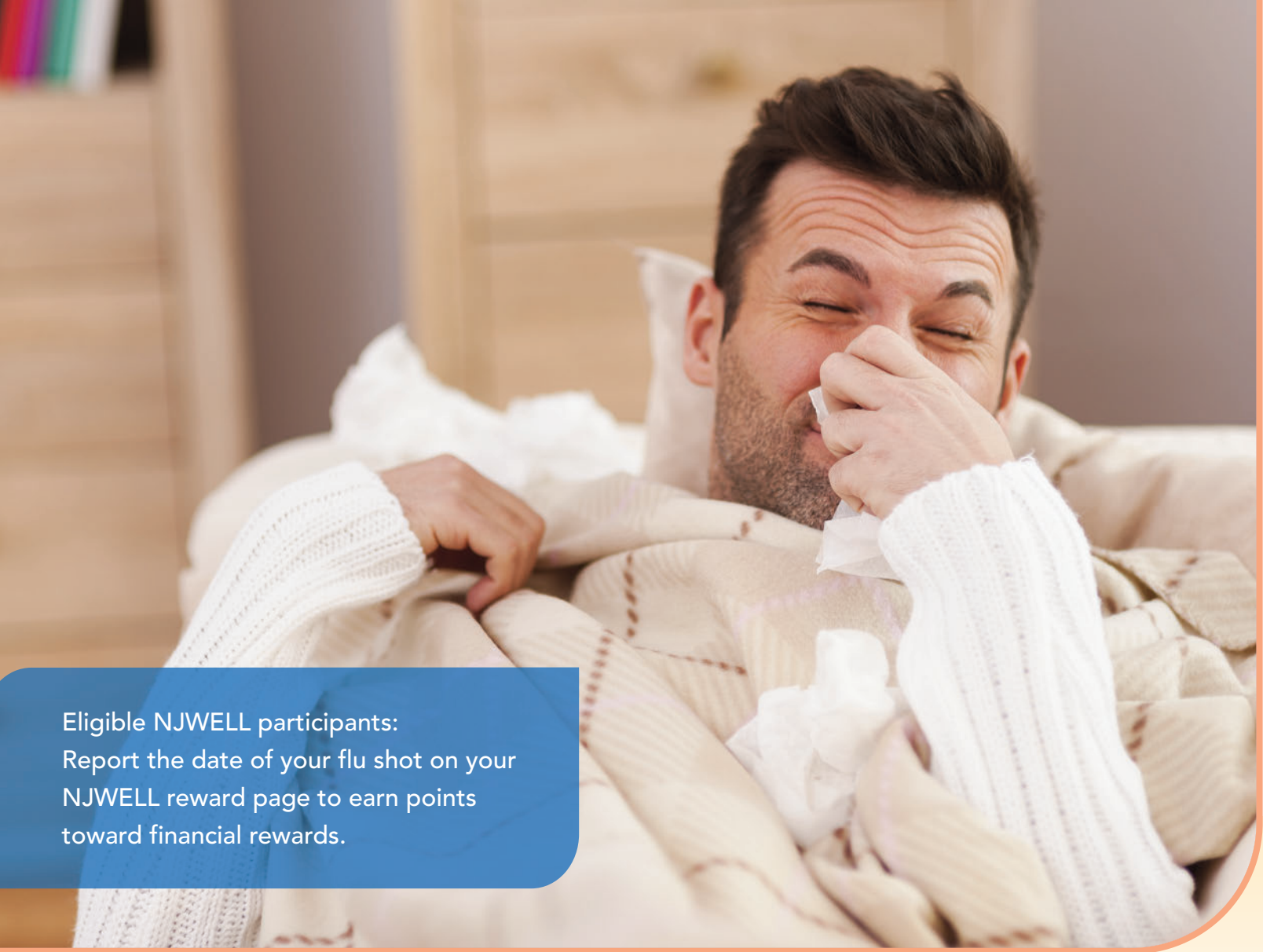


Your health care news across the region
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Eligible NJWELL participants:
Report the date of your flu shot on your
NJWELL reward page to earn points
toward financial rewards.

New season, new flu shot

*Getting the flu
Since flu shots are
considered a
preventive service,
there is no cost
to you.*



Health officials say that the best way to fight the flu is by getting a flu shot. This season's flu shot will contain two new flu strains that health officials hope will do a better job of preventing the flu.

Horizon BCBSNJ makes it easy and convenient for you and your covered family members to get a seasonal flu vaccination. We have participating pharmacies in New Jersey that can administer the flu shot and other vaccines, and submit medical claims for you and your eligible dependents.

And, since flu shots are considered a preventive service, there is no cost to you.

Flu refers to illnesses caused by a number of different influenza viruses. Seasonal flu outbreaks usually begin in the late fall and last through early spring.

Flu can cause different symptoms and effects, from mild to serious. Most healthy people recover from the flu without problems, but certain people are at high risk for serious complications.

To find out more about the flu shot and other immunizations, visit HorizonBlue.com/Flu.

Source:

Centers for Disease Control and Prevention,
cdc.gov/flu

Breast cancer screenings save lives

According to the American Cancer Society, breast cancer is the second most common cancer among women in the United States. In fact, every two minutes in the U.S., a woman is diagnosed with breast cancer.

What is your best defense?

Get screened. Regular breast cancer screenings, as recommended by the American Cancer Society, have been shown to be effective in decreasing breast cancer deaths.

The following screenings are recommended to find breast cancer early, when it is most treatable:

Breast self-exam (BSE): A BSE is when you check your own breast for lumps or changes. BSE is an option for women ages 20 years or older. Ask your doctor to explain the benefits and limitations of a BSE. Become familiar with your body to learn what your breasts look and feel like. If you notice any changes, like a difference in the size or shape of your breast, nipple discharge or tenderness, lumps, ridges or dimpling of the breast, tell your doctor right away.

Clinical breast exam (CBE):

A CBE is an exam by a doctor or nurse who uses his or her hands to feel for lumps or other changes. A CBE should be performed about every three years for women in their 20s and 30s, and every year for women ages 40 years and older, as recommended by the American Cancer Society.

Mammography: An annual mammogram is recommended for women beginning at age 40 years, or younger for women at high risk.

Talk to your doctor about which breast cancer screenings are appropriate for you.

Sources:

American Cancer Society, Inc.,
cancer.org/research/cancerfactsstatistics
Susan G. Komen, komen.org



According to the American Cancer Society, an estimated 60,000 cases of breast cancer will be diagnosed in 2015.

Did you know?

- ◆ The older a woman is the more likely she is to get breast cancer.
- ◆ White women are more likely to get breast cancer than women of any other racial or ethnic group.
- ◆ African-American women are more likely to die from breast cancer than white women.
- ◆ Men can get breast cancer. About 1 percent of breast cancer cases in the U.S. occur in men.



NJWELL

Working for a
Healthy New Jersey

NJWELL participants:
Don't forget to log in to Member Online Services at HorizonBlue.com/Members to check the NJWELL reward page where you can learn about online coaching, online activities and other ways you can earn points toward financial rewards!





Stay on top of your diabetes

Managing your diabetes and talking to your doctor can help prevent further complications.



Getting regular care for your diabetes can help you prevent further health complications such as heart disease, stroke, and eye, foot or kidney problems.

Did you know that you control most of the day-to-day care of diabetes? You:

- ◆ Choose what, when and how much you eat.
- ◆ Decide how much exercise you get, taking into consideration any physical limitations you have.
- ◆ Take your medicines.
- ◆ Keep track of your blood glucose (sugar) levels.

Your doctor can provide you with information about diabetes care and monitoring your A1C (average blood glucose), blood pressure, cholesterol and other measures.

What to expect during doctor visits

Review the list below with your doctor to make sure you are up to date on what you need for the best diabetes care.

At every office visit:

- ◆ Talk about your home blood-glucose checks.
- ◆ Check your blood pressure.
- ◆ Have your weight measured and body mass index (BMI) calculated.
- ◆ Discuss your meal plan.
- ◆ Review exercise and healthy lifestyle goals.
- ◆ If you smoke, talk about a plan to quit.
- ◆ Review all of your medications.
- ◆ Ask about taking aspirin for prevention of heart attack and stroke.
- ◆ Ask any questions you may have about diabetes.

(continues on next page)

At least every three to six months

- ◆ **Check your A1C.** It tells your average blood glucose for the past two to three months. If your average blood glucose is too high, you may need a change in your diabetes care plan.



At least once a year

- ◆ **Check your cholesterol.**
- ◆ **Check your kidneys for changes or damage with a urine microalbumin test.** This is a test for a specific kind of protein in the urine.
- ◆ **Have a complete foot exam.** Your doctor can check your feet more thoroughly for signs of nerve damage or other problems.
- ◆ **Have a dilated eye exam.** An eye doctor should check your eyes for early signs of damage from diabetes.
- ◆ **Get a flu shot.** Make sure you get this preventive care every year.

Other things to do

- ◆ **Diabetes education and nutrition counseling.** If you are finding it hard to follow your diabetes management plan, you may want to get diabetes education and nutrition counseling from your doctor. Our Chronic Care Program can help. Read the article on the right for more information.
- ◆ **Pregnancy.** Talk to your doctor if you plan to become pregnant. Work to get to a healthy weight and activity level before and during pregnancy.

Source:
American Diabetes Association, diabetes.org



Help is available for your chronic condition

Do you need help managing your chronic health conditions? If so, enroll in our **Chronic Care Program**.

It's a free, voluntary program that promotes healthy living for eligible members who have been diagnosed with one or more of these chronic conditions:

- ✓ Asthma
- ✓ Chronic Kidney Disease (CKD)
- ✓ Chronic Obstructive Pulmonary Disease (COPD)
- ✓ Coronary Artery Disease (CAD)
- ✓ Diabetes
- ✓ Heart failure

To learn more about our Chronic Care Program or to enroll, call **1-888-345-1150**, Monday through Friday, between 8 a.m. and 7 p.m., Eastern Time, or visit HorizonBlue.com/Chronic-Care.



A healthy you takes two

Your relationship with your doctor, including how well you communicate with each other, affects your care.



You and your doctor are a team, and research shows that patients who have a strong relationship with their doctors or other health care professionals tend to be healthier and more satisfied with their health care.

Take charge of your health

Prepare for your office visit

- ◆ Know your medical history. Bring along any medical information, such as test results and your current medications, including prescriptions, over-the-counter medications and herbal supplements.
- ◆ Make a list of questions you have concerning your symptoms, condition and treatment.

During your office visit

- ◆ Discuss your current symptoms and go over your list of questions or concerns.
- ◆ Make sure you understand what your doctor is telling you. Don't be afraid to ask questions about something you don't understand or if you would like to know something your doctor hasn't covered.

Schedule your follow-up appointment

- ◆ Schedule any follow-up appointments before you leave the doctor's office.

Your doctor's role in your good health

Your doctor should listen, educate, inform and be considerate of your concerns. Ask yourself, did my doctor:

- ◆ Discuss my symptoms in a clear and concise manner?
- ◆ Actively listen to my concerns and provide answers in terms I could understand?
- ◆ Encourage me to participate in considering treatment options?
- ◆ Ensure that I understand my medications, directions for use and the possible side effects?
- ◆ Summarize my plan of treatment, tests and any follow-up care?

Your relationship with your doctor, including how well you communicate with each other, affects your care. Visit our *Online Doctor & Hospital Finder* at HorizonBlue.com/doctorfinder to find participating doctors in your area.

Depression can affect treatment of chronic illness

Living with a chronic illness, such as diabetes or Coronary Artery Disease, can cause depression, which can get in the way of successful treatment. Although it is normal to feel sadness and despair when managing a chronic illness, you should contact a health care professional if these feelings do not go away. It is important to remember that depression is a treatable disease.

It is common for people who have a chronic illness, and their family and friends, to overlook signs of depression. They assume the behavior is normal for someone struggling with a chronic illness*. Sometimes the physical effects of the illness itself or the side effects of medication lead to depression. The symptoms get treated, but not the underlying depression. When you have both a chronic illness and depression, you need to treat both at the same time.



Improving the quality of your care

At Horizon BCBSNJ, we're committed to making sure you have access to quality care. Our Quality Improvement Program (QIP) monitors and works to improve the quality of care and services provided to you.

For more information on the QIP, please visit HorizonBlue.com, scroll down to *Corporate Sections* and click *Our Company*, then click *Company Reports*. If you don't have access to the internet, please call the Quality Management Department at 1-877-841-9629 to request a copy of the information.

Signs and symptoms of depression

- ◆ Ongoing sad, anxious or "empty" feelings
- ◆ Feelings of hopelessness, guilt, worthlessness or helplessness
- ◆ Loss of interest in hobbies and activities that you once enjoyed
- ◆ Being tired all the time
- ◆ Difficulty concentrating, remembering or making decisions
- ◆ Difficulty sleeping
- ◆ Loss of appetite or overeating
- ◆ Thoughts of death or suicide or suicide attempts
- ◆ Restlessness, irritability
- ◆ Aches and pains, headaches, cramps or digestive problems that do not ease with treatment

If you or a family member has any of the above signs and symptoms, talk to your doctor immediately.

If your Horizon BCBSNJ health plan includes behavioral health coverage, you can call Horizon Behavioral HealthSM at 1-800-991-5579. Behavioral health services are available 24 hours a day, seven days a week. All calls are confidential.

Sources:

National Institute of Mental Health, nimh.nih.gov
WebMD, webmd.com

* Our Chronic Care Program is available to help members manage their chronic illnesses. (See article on page 7.)



NJWELL Participants:
Don't forget to log in to
Member Online Services at
HorizonBlue.com/Members
to check the NJWELL
reward page where you can
learn about online coaching,
online activities and other
ways you can earn points
toward financial rewards!

4 steps to staying healthy at any age

*Take charge of
your health by
making healthy
decisions today.*



No matter how old you are, the key to maintaining good health is to be proactive. This means taking steps every day for overall good health, taking preventive medications and getting regular health screenings.

Step 1 | Take charge of your health*

- ✓ **Be physically active and make healthy food choices.** Start making exercise and healthy eating part of your everyday life.
- ✓ **Get to a healthy weight and stay there.** Balance the calories you take in from food and drink with the calories you burn off by your activities.
- ✓ **Be tobacco free.** For tips on how to quit, go to smokefree.gov. To talk to someone about how to quit, call the National Quitline: 1-800-QUITNOW (784-8669).
- ✓ **If you drink alcohol, have no more than two drinks per day if you are age 65 years or younger.** If you are older than 65 years, have no more than one drink a day. A standard drink is one 12-ounce bottle of beer or wine cooler, one 5-ounce glass of wine or 1.5 ounces of 80-proof distilled spirits.

*Be sure to talk to your doctor before starting a new exercise regimen.

- ✓ **Make an appointment to see your doctor.** You and your doctor are a team and together you can take steps to help you get and stay healthy (see article on page 8).

Step 2 | Take preventive medications

If your doctor has prescribed a preventive medication for you, be sure to take it as directed.

Step 3 | Get appropriate shots and immunizations

Talk with your doctor about which immunizations are appropriate for you. In the past year, there have been more reports of illness from flu and measles. Immunizing yourself and your children as recommended is the best way to help keep you and your family protected from the flu and other diseases that have available and effective vaccines.

(continues on next page)

Step 4 | Take advantage of health screenings that are right for you

Screenings are tests that look for diseases before you have symptoms. Below are some examples of common screenings. Talk to your doctor about which screenings are right for you.

Recommended screenings for adults

Blood Pressure: Have your blood pressure checked annually. High blood pressure can cause stroke, heart attack, kidney and eye problems and heart failure.

Breast Cancer Screening: Screening mammography, with or without clinical breast examination, is recommended every year for women beginning at age 40 years.

Breast, Ovarian, Tubal or Peritoneal Cancer/Breast Cancer (BRCA) Risk Assessment:

Family history should be reviewed. Women with a family member with one of these cancers should be assessed for increased risk for a potentially harmful (BRCA1/BRCA2) gene mutation.

Cervical Cancer Screening:

Recommended for women ages 21 to 65 years with either cytology (Pap test) every three years or a combination of cytology and human papillomavirus (HPV) testing every five years for women ages 30 to 65 years who want to lengthen the screening interval.

Cholesterol: All adults ages 20 years or older should have their cholesterol levels tested at least once every five years or more often as directed by a doctor. High cholesterol increases the chances of heart disease, stroke and poor circulation.

Colon Cancer: Have a screening test for colorectal cancer starting at age 50 years. If you have a family history of colorectal cancer, you may need to be screened earlier.

Depression: Your emotional health is as important as your physical health. Talk to your doctor about being screened for depression.

Diabetes: This screening should be considered for all high-risk adults who are overweight or obese and who have one or more additional risk factors for diabetes. If no risk factors exist, testing should start at age 45 years then at three-year intervals if test results are normal.

Overweight and Obesity: The best way to learn if you are overweight or obese is to find your body mass index (BMI), which is determined by your height and weight measurements. Your doctor can evaluate your BMI and make recommendations based on your personal risk factors and overall health.

You know your body better than anyone else. Take charge of your health by making healthy decisions today and talk to your doctor about the best way you can stay on the road to good health.



Sources:

United States Preventive Services Task Force, uspreventiveservicestaskforce.org
U.S. Department of Health and Human Services, healthfinder.gov



We speak your language

If you do not speak English, you may get information about your health plan through the AT&T Language Line, a translation service.

To be connected to the AT&T Language Line, please call Member Services at **1-800-414-SHBP (7427)**, Monday through Wednesday and Friday, between 8 a.m. and 6 p.m., Eastern Time (ET), or Thursday, between 9 a.m. and 6 p.m., ET.

Visita HorizonAzul.com, un sitio en internet en español de Horizon BCBSNJ que proporciona a los miembros acceso a información y planes de salud, tanto en español como en inglés.



You can always view the status of your claims and read your EOB statements online by signing in to Member Online Services at HorizonBlue.com/Members. And while you're there, you can also sign up for paperless EOBs by selecting the *Preferences & Notifications* tab.

What your plan pays, what you pay

Your EOB statement explains how your plan pays claims and any amount you may have to pay.



Have you ever received your Explanation of Benefits (EOB) statement and wondered what it was and what you should do with the information?

Each time you or a covered family member visits a doctor, other health care professional or facility, a claim is submitted to Horizon BCBSNJ. Your EOB statement will show you the:

- ◆ **Date and type of service.**
- ◆ **Billed amount:** The amount charged by your doctor or health care professional for the service received.
- ◆ **Allowed amount:** The rate Horizon BCBSNJ has negotiated with doctors, hospitals and other health care professionals who participate in your health insurance plan.
- ◆ **Copayment:*** The amount you pay for each medical visit to a participating doctor or other health care professional, usually at the time of service.
- ◆ **Coinsurance:*** The part of a covered charge that you're responsible for paying.
- ◆ **Your deductible amount:*** The amount you must pay each year before your Horizon BCBSNJ health plan starts to pay for covered services. You can check the amount that you have paid towards your deductible and the out-of-pocket costs when you sign in to Member Online Services at HorizonBlue.com/Members and click *View Out-of-Pocket Expenses*.
- ◆ **Other carrier payment amount:** The amount paid by another insurance company, if applicable. This only applies if you have other insurance from another company.
- ◆ **Not covered amount:** Any amount for treatment or services not covered under your benefits contract. You will be responsible to pay this amount.
- ◆ **Horizon BCBSNJ paid amount:** The total amount paid to you, your doctor, facility or health care professional for the services performed.
- ◆ **Message code:** Provides details on how your claim was calculated.
- ◆ **Subscriber responsibility:** The balance you owe to the doctor, health care professional or facility after the copayment, deductible, coinsurance and benefits have been applied.

*If applicable to your plan.

How we make coverage decisions

Have you ever wondered how Horizon BCBSNJ makes coverage decisions? We want you to know that Horizon BCBSNJ:

- ◆ Makes utilization management (UM) decisions based on the necessity and appropriateness of care and service within the guidelines of your benefit coverage.
- ◆ Does not offer our employees, or delegates performing medical management reviews, incentives to encourage denials of coverage or service, and does not provide financial incentives to doctors to withhold covered health care services that are medically necessary and appropriate.
- ◆ Emphasizes access to the delivery of medically necessary and cost-effective health care services for members.
- ◆ Encourages the reporting, investigation and elimination of underutilization or overutilization. Underutilization is when you aren't getting enough care or services to properly meet your needs. Overutilization is when you undergo treatments, tests and studies that you don't need. Both underutilization and overutilization traditionally result in costly and improper use of services and are not helpful to you.

For more information, please call Member Services at **1-800-414-SHBP (7427)**.



Effective care

Horizon BCBSNJ recognizes that underusing and/or overusing health care services can negatively impact your overall health. To respond to authorization requests and inquiries about utilization management (UM), our UM staff is available Monday through Friday, between 8 a.m. and 5 p.m., Eastern Time. Simply call Member Services at **1-800-414-SHBP (7427)**. TTY/TDD users can call **711**. Our on-call staff is also available after normal business hours, including weekends and holidays, for emergency requests.





You have the right to appeal a claim

Horizon BCBSNJ will provide a timely, fair and full investigation and resolution of your appeal.



You have the right to appeal any decision made regarding your health care and plan coverage. This includes administrative and utilization management determinations.

- ◆ Administrative determinations usually involve benefit issues.
- ◆ Utilization management determinations involve a denial, termination or other limitation of covered health care services based on clinical criteria.

If you have filed an appeal, Horizon BCBSNJ will provide a timely, fair and full investigation and resolution of your appeal. For a complete description of our internal appeals process, please refer to your Member Handbook or call Member Services at 1-800-414-SHBP (7427).

Medical Appeals will be reviewed by Horizon BCBSNJ in a timely manner. Once the internal appeal process has been completed, you will have the right to request an external appeal through an Independent Review Organization. You will receive a letter that will explain the process for filing an external appeal for a medical appeal.

Horizon BCBSNJ will handle Administrative Appeals as well as provide a final written determination that will contain the address for the next level of appeal through the State Health Benefits Commission.

Get answers with *My Message Center*

What if you have a health insurance question after business hours? With *My Message Center*, our new secure and convenient online tool, you can send us your health plan coverage questions anytime – day or night.

Using *My Message Center* is easy. Simply sign in to Member Online Services at HorizonBlue.com/Members and click *My Message Center* at the top of the screen. From there you can select from one of five categories. Then, simply type your question and click *Send*.

Once you submit your question, a Horizon BCBSNJ Member Services Representative will reply within two business days.

Messages can only be sent and retrieved by signing in to Member Online Services. *My Message Center* also provides a convenient record of your information and you can refer back to the message exchange.*

*Messages remain in your secure Message Center inbox for 18 months.

In addition to *My Message Center*, as a registered member of Horizon BCBSNJ's Member Online Services, you also have exclusive access to many other tools and features that can help you manage your health coverage information, including:

- ◆ Checking the status of a claim
- ◆ Printing a duplicate member ID card
- ◆ Viewing benefits
- ◆ Viewing authorizations and referrals
- ◆ And more

Horizon BCBSNJ's *My Message Center* was developed with you in mind – we want to make it easier for you to get the health coverage information you need.

To learn more about Member Online Services, watch our *At a Glance* video at HorizonBlue.com/Members. Go to the *Education Center* and choose *Video Learning Library*.



Still have questions ... our online Frequently Asked Questions (FAQ) may be the answer

You can visit HorizonBlue.com/FAQs for easy-to-follow steps on how to get the information you need from Member Online Services. Our FAQs are organized so you can quickly find information about:

- ◆ Claims
- ◆ Eligibility
- ◆ Enrollment and billing
- ◆ Finding a doctor





Keeping your adult children on your plan

This New Jersey mandate applies to qualifying dependents between the ages of 26 and 31 years.



Did you know that New Jersey law allows you to keep your children on your plan until they turn 31 years? This differs from the provision in the health care reform law that requires health plans to extend coverage for dependents to age 26 years. Under New Jersey law, qualifying dependents between the ages of 26 and 31 years pay a small premium to continue receiving dependent coverage.

The mandate defines a qualified dependent as the child of an insured subscriber, by blood or by law, who:

- ◆ Is 30 years of age or younger;
- ◆ Is unmarried and not in a civil union or a domestic partnership;
- ◆ Has no dependents;

- ◆ Is either a New Jersey resident, or, if a nonresident, is enrolled as a full-time student at an accredited school;
- ◆ Is not the insured person under a group or individual health benefits plan or church plan or entitled to benefits under Medicare at the time health plan continuation coverage begins; and
- ◆ Can provide evidence of prior creditable coverage or receipt of benefits under another group or individual health benefits plan. This is usually a written certificate issued by an insurer that shows the dates a prior health plan began and ended.

For additional eligibility and enrollment information, please contact your group administrator or call Member Services at 1-800-414-SHBP (7427).

5 healthy things you can do this fall

Now that summer is over and fall is upon us, it's a great time to freshen up your healthy habits. As the seasons change, take stock of where you are on the road to good health and where you want to be. Why wait for New Year's Day to set healthy goals when now is the perfect time? Here are some ways you can stay healthy this fall:



1 Pumpkin recipes

Try some healthy pumpkin recipes, like pumpkin spread, roasted pumpkin seeds or roasted pumpkin salad. The pulp of the pumpkin has lots of vitamins A and C, and the seeds are rich in phytosterols, which may help to lower cholesterol.



2 Outdoor fall activity

Take in the changing scenery on a run, hike, bike ride or walk. Not only will you get some exercise*, but you'll increase your vitamin D levels, which can improve your concentration.



3 Healthy snacks for the game

Serve raw veggies and dip instead of chips. If you still want to enjoy the traditional game-day foods, try cutting the portion sizes. For instance, you can cut pizza into smaller slices or serve chili in small cups instead of bowls.



4 In-season vegetables

Autumn vegetables such as cabbage, carrots, cauliflower, eggplant, kale and squash contain vitamins that are great for heart health.



5 A healthier Thanksgiving

Try starting the holiday with a breakfast high in protein and fiber, which will boost your metabolism and help prevent sugar cravings. Later in the day, before dinner, make a plan of what you will eat and what you won't. Having a plan will help keep you on track.

Sources:

U.S. News and World Report, health.usnews.com
Harvard School of Public Health, hsph.harvard.edu

*Be sure to talk to your doctor before starting a new exercise regimen.



Dental 101

Dental implants?
Crowns? Gum disease?

Now, you can get easy-to-understand answers to your dental health questions on our new dental education website at HorizonBlue.com/Dental.

On this site, members and consumers can learn about dental health and common dental procedures.

You can also watch videos on treatments, such as dental implants, crowns and bridgework, and read comprehensive articles on a wide range of oral health topics.

Remember to bookmark HorizonBlue.com/Dental.



NJWELL participants: Don't forget to log in to Member Online Services at HorizonBlue.com/Members to check the NJWELL reward page where you can learn about online coaching, online activities and other ways you can earn points toward financial rewards!



Where to go in an emergency

*If you are faced with a medical emergency, you **do not** need to call Horizon BCBSNJ Member Services before going to the nearest ER.*



If you find yourself in a true medical emergency:

1. Go directly to the nearest Emergency Room (ER), or call **911** or your local emergency number.
2. If you are able, call your doctor before you go to the ER. If you cannot call your doctor before you go, make sure to call within 48 hours or as soon as reasonably possible. If you are unable to call, have someone else call on your behalf. It is important that your doctor is kept aware of your condition.

Without this information, your doctor cannot properly coordinate your care or ensure that you receive the right care at the right time in the right setting.

What is a true medical emergency?

A true medical emergency is a medical condition of such severity that a prudent person with average knowledge of health and medicine would call for immediate medical attention. For a complete definition, please refer to **HorizonBlue.com** and click *Glossary* in the lower right navigation bar.

Examples of true medical emergencies

- ◆ Uncontrolled bleeding
- ◆ Poisoning
- ◆ Obvious bone fractures
- ◆ Signs of heart attacks and strokes
- ◆ Difficulty breathing
- ◆ Wounds requiring sutures
- ◆ Loss of consciousness

(continues on next page)

Your Horizon BCBSNJ plan covers a medical emergency screening exam. This is an evaluation performed in an ER by qualified health care personnel to determine if a medical emergency exists. Horizon BCBSNJ will cover the cost of the medical emergency screening exam. If it is determined that a medical emergency does not exist, please follow up with your doctor for instructions. If you continue to receive services in the ER after you have been advised that your condition is not a medical emergency, you may be responsible for additional out-of-pocket costs.

Care on nights and weekends

Should you need to be treated after hours or on weekends, your doctor or his or her covering health care professional is available 24 hours a day, seven days a week.

See your doctor for routine care

The best place for routine, nonemergency care is your doctor's office.

You and your doctor should:

- ◆ Build a medical relationship.
- ◆ Develop a personalized treatment plan.
- ◆ Plan appropriate preventive measures.
- ◆ Discuss your family's health history.
- ◆ Ensure that your treatment is appropriate.

Additional resources

◆ Urgent Care Centers:

Participating Horizon BCBSNJ Urgent Care Centers throughout New Jersey treat patients who have an injury or illness that requires immediate care but is not serious enough for a visit to the ER. With extended and weekend hours, Urgent Care Centers treat wounds, sprains and other conditions that are not life-threatening. All participating Urgent Care Centers can perform essential services for diagnosis and treatment. Use our *Online Doctor & Hospital Finder* at [HorizonBlue.com/doctorfinder](https://www.horizonblue.com/doctorfinder) to find a participating Urgent Care Center.

- ◆ **24/7 Nurse Line***: If you are unsure whether you require urgent or emergency care, call our 24/7 Nurse Line. Registered nurses who are specially trained in telephone health care decision counseling offer prompt health information to help you make informed decisions about your health care. Our nurses can help you determine if you need to go to an ER, an Urgent Care Center or your doctor's office, or if self-care is right for your needs. They can also coach you on how to make appointments with your doctor more productive. This service is available 24 hours a day, seven days a week, at the number listed on the back of your Horizon BCBSNJ member ID card.

* This service can help you make decisions about nonemergency, health-related situations. It is for informational purposes only. Nurse Line nurses cannot diagnose problems or recommend specific treatment and are not a substitute for your doctor's care. Nurse Line services are not an insurance program, emergency service or urgent care service, and may be discontinued at any time. In the event of an emergency, call 911 or your local emergency number and/or your doctor. Your Horizon BCBSNJ health plan covers you for medical emergency care 24 hours a day, seven days a week.



Working for a Healthy New Jersey

Congratulations to all participants who have already earned an NJWELL \$100 reward card this year for reaching the 300 point level. Many of you are also on target to receive a second reward card for \$50 or \$100 for reaching a total point value of 400 or 500. If you have not yet reached the 500 point maximum, there's still time – but remember that all your activities must have been completed on or after November 1, 2014 and reported by October 31, 2015.

A new NJWELL program year will begin November 1, 2015. In the third year of the program, NJWELL will be focused on continuous engagement and goal achievement. By continuing to participate in healthy activities, staying current on your preventive health screenings and participating in online activities and personal wellness coaching, you can make a big impact on maintaining or improving your health.

Begin by taking - or retaking – your Health Assessment on or after November 1, 2015. To access the online questionnaire, log in to Member Online Services at **HorizonBlue.com/SHBP**, click the *Tools and Resources* tab, select *My Health Manager* from *Self Service*. In the *Healthy Living* tab, find the *Health Assessment Tool* to take your Health Assessment. Then click *Rewards* to view your NJWELL Rewards Lobby.

After you complete the Health Assessment, then schedule a Health Screening with your doctor (or attend an onsite screening event), try an online activity, chat with a coach or have an age-appropriate screening – it's up to you!

Once you have completed the online Health Assessment (100 points), a Health Screening (100 points) and earned at least 200 more points by



completing elective activities from the list on the reward page, you will be issued a \$125 reward card.

You can continue to earn additional NJWELL points, up to a maximum of 725, until October 31, 2016 and a **second reward card** at the end of the year:

- ◆ 550-700 points in total earns a **second reward card** in the amount of \$50
- ◆ 725 or more points in total earns a **second reward card** in the amount of \$125

That's a possible \$250 in rewards, in total, in Year 3 based on your total points earned by October 31, 2016 – all for participating and Working for a Healthy New Jersey!

*NJWELL is the wellness program for actively employed SHBP/SEHBP members and their eligible spouses/partners. By encouraging members to take ownership of their health, the SHBP/SEHBP hopes to increase overall wellness and reward eligible employees and their covered spouses/ partners for completing activities geared toward health and wellness. Horizon BCBSNJ is proud to be working with the New Jersey Division of Pensions and Benefits to help New Jersey's public employees cultivate healthy lifestyle choices, lower health risk factors and improve wellbeing. More information about NJWELL is on **HorizonBlue.com/shbp** and on the Division of Pensions and Benefits' website.*

What are you waiting for?

NJWELL Rewards for 2015 end soon!

Time is running out - your chance to earn rewards for 2015 participation in NJWELL will end October 31, 2015! If you and your eligible spouse/partner haven't yet earned at least 300 points by completing your online Health Assessment (150 points), Health Screening (100 points) and another elective activity or activities from the list on the reward page (50+ points), take the time now to earn a \$100 reward card. Biometric screening results can be submitted by your doctor using the NJWELL Physician Biometric Health Screening form.

Participants who reach a total point value of 400 or 500, will receive a **second reward card** for \$50 or \$100. That's a total of \$200 in rewards in Year 2. All activities must have been completed on or after November 1, 2014 and reported by October 31, 2015.

Remember you need to be registered for Horizon BCBSNJ's secure Member Online Services to access My Health Manager, identify rewardable NJWELL activities, complete the online wellness activities and track your progress. Log in at **HorizonBlue.com/SHBP**.





New diagnostic health codes are on the way

Is your doctor ready?

Beginning October 1, 2015, all U.S. doctors, health care professionals and health plans are required to use new diagnostic health codes as mandated by the Department of Health and Human Services. What this means is that any time you have a health care service, your doctor or health care professional will bill for services using the new codes.

The updated coding is called ICD-10, which is simply an abbreviation for *International Classification of Diseases, 10th revision*. ICD-10 will replace the ICD-9 codes that are currently in place.

We encourage you to check with your doctors and other health care professionals to see if they will be ready to use the new ICD-10 codes on October 1, 2015. This is important because claims submitted with dates of service on or after October 1, 2015 without the new codes will be rejected and returned to your doctor or health care professional.

